Fill in this information to identify you	r case:
United States Bankruptcy Court for the: Middle District of Florida	
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

HLED JACKSONVILLE FLORIDA

2019 JAN 14 P 1: 23

JS.	SHAPEUPTUY CO	URT Check if this is an
	MIDDLE DISTRICT	Check if this is an
	OF FLORIDA	amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			######################################
	Write the name that is on your government-issued picture	Elizabeth		
	identification (for example, your driver's license or	First name B		First name
	passport).	Middle name Jennings		Middle πame
	Bring your picture identification to your meeting with the trustee.	Last name		Last name
	Will the trace.	Suffix (Sr., Jr., II, III)		Suffix (Sr., Jr., II, III)
2.	All other names you		SPRIN	
	have used in the last 8 years	First name		First name
	Include your married or maiden names.	Middle name		Middle name
		Last name		Last name
and the second		First name		First name
		Middle name		Middle name
		Last name		Last name
-	**************************************		*****	
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>1</u> <u>1</u> <u>8</u> <u>6</u>		xxx - xx
	number or federal	OR		OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx		9 xx - xx

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 2 of 60

Debtor 1

Elizabeth B Jennings

LIIZADÇUI	Documngs		
First Name	Middle Name	Last Name	

panana				
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in		☑ I have not used any business names or EINs.		☐ I have not used any business names or EINs.
	the last 8 years	Business name	-1.5%	Business name
]	-		1.40	
	Include trade names and			
-	doing business as names	Business name	3.22	Business name
			1	
-				•
		EIN		<u>EIN</u> — — — — — —
A18008181				LIII
AND COMPANY		_	¥	:
· ·		EIN		EIN — — — — — — —
***************************************			-87	
	(400	
-			*******	
_	Where you live	·		If Debtor 2 lives at a different address:
5-	Where you live			ii Debtoi 2 iives at a unierent address.
		7424 Floatra Driva South	1111	
		7134 Electra Drive South		Nb
		Number Street		Number Street
			1000	
		•		
;				
ļ		11		
1		Jacksonville FL 32210		
		City State ZIP Code		City State ZiP Code
į		Duval		
			7.75	County
		County		County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street		Number Street
		P.O. Box		P.O. Box
		20.0		City State ZIP Code
		City State ZIP Code		City State ZIP Code
-			*********	
R	Why you are choosing	Check one:		Check one:
0.	this district to file for		1838	CHOOK ONG.
	bankruptcy	Over the last 180 days before filing this petition,		Over the last 180 days before filing this petition,
	валкторксу	I have lived in this district longer than in any		I have lived in this district longer than in any
		other district.		other district.
		D		m
		I have another reason. Explain.		I have another reason. Explain.
		(See 28 U.S.C. § 1408.)		(See 28 U.S.C. § 1408.)
			45	
				· · · · · · · · · · · · · · · · · · ·
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			. المالية المالية	

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 3 of 60

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υe	DIOL	

Elizabet	in B J	Jennin	as

First Name Middle Name Last Name

Case number (if known)	
------------------------	--

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- 11		_

Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you			a brief description of each, s Form 2010)). Also, go to the			U.S.C. § 342(b) for Individuals Filing he appropriate box.		
	are choosing to file under	☐ Chapter 7							
	under	☐ Chapter 11							
		☐ Cha	pter 12						
		☑ Cha	pter 13						
HENSI HENSIN		CONSTRUCTION (NO. 000 - 100 -	neme momente e metrop e puid		KO 201 HZ F 30 F 80 F 40 F K F 70 F F F F F F F F F F F F F F F F F	MEANCH COMES TO A COMES OF MEAN OF MEA	» Менан у посном эксплонования основности основности от техня менания и техня от техня		
8.	How you will pay the fee	local your subr	□ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
							otion, sign and attach the ents (Official Form 103A).		
		□ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.							
						······································			
9.	Have you filed for bankruptcy within the last 8 years?	☐ No ☑ Yes.	District	Middle District of FL	_ When	06/02/2016 MM / DD / YYYY	Case number 3:16-bk-02087-JAF		
			District	Middle District of FL	_ When	10/02/2015 MM / DD / YYYY	Case number 3:15-bk-04383-JAF		
			District	Middle Distict of FL	When	MM / DD / YYYY	Case number 3:15-bk-03837-JAF		
10.	Are any bankruptcy	☑ No	***************************************	and and an and an analysis of the second and an analysis of the second and an an an analysis and an analysis a	an 1987 BY 1981 THE THY THE TAN THE T	COMPANIENCE IN LOCALISM TO LOCALISM LOCALISM LOCALISM LABOUR LABOUR LOCALISM LABOUR LABOUR LABOUR LABOUR LABOUR			
	cases pending or being filed by a spouse who is	🔲 Yes.	Debtor				Relationship to you		
	not filing this case with you, or by a business partner, or by an affiliate?				_ When	MM / DO / YYYY	Case number, if known		
	aimate:		Dabtor				Relationship to you		
					_ When		Case number, if known		
11.	Do you rent your residence?	☑ No. ☐ Yes.	□ No	ur landlord obtained an evic . Go to line 12.	bout an	Eviction Judgment	? t Against You (Form 101A) and file it as		

	liza	beth	P	lor	nin	ac
ᆮ	ııza	petn	В	Jer	าเวเท	as

First Name Middle Name Last Name

Case number (if known)

D	-

Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.
If you have more than one sole proprietorship, use a separate sheet and attach it

to this petition.

✓ No. Go to Part 4.

☐ Yes. Name and location of business

Name of business, if any

Number Street

City State ZIP Code

Check the appropriate box to describe your business:
☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(6))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

13. Are you filling under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.

■ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4:

Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Ø	No

☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed? ____

Where is the property?

Number

Street

City

State

ZIP Code

Elizabeth B Jennings

st Name Middle Name

Last Name

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary walver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

_	I I am not required to receive a briefing	about
	credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

J	l am i	not	required	to	receive	a	briefing	about
	credi	t co	unseling	b	ecause (of:		

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a bridging in person, by phone, or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 6 of 60

Debtor 1 Elizabeth B Jennings
First Name Middle Name Last Name

Case number (# known)

Pa	nt 6: Answer These Ques	stions for Reporting Purposes		
16.	What kind of debts do you have?		consumer debts? Consumer debts ar imarily for a personal, family, or househo	
		16b. Are your debts primarily i	business debts? Business debts are of ment or through the operation of the business	
		☐ No. Go to line 16c. ☐ Yes. Go to line 17.	ment of unlough the operation of the busi	ness of investment.
		16c. State the type of debts you own	e that are not consumer debts or busines	s debts.
17.	Are you filing under Chapter 7?	No. I am not filing under Chapte	er 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapter 7. administrative expenses and No	Do you estimate that after any exempt pe paid that funds will be available to distr	oroperty is excluded and ibute to unsecured creditors?
18.	How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19.	How much do you estimate your assets to be worth?	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	How much do you estimate your liabilities to be?	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Pa	rt 7: Sign Below			
Fo	r you	I have examined this petition, and I correct.	declare under penalty of perjury that the	information provided is true and
			er 7, I am aware that I may proceed, if eliq derstand the relief available under each c	
			id not pay or agree to pay someone who read the notice required by 11 U.S.C. § 3	
		I request relief in accordance with th	e chapter of title 11, United States Code	, specified in this petition.
			ent, concealing property, or obtaining mor fines up to \$250,000, or imprisonment fo 3571.	
		×	*	
		Signature of Gebtor 1 Executed on MM// DD//YYY	Signature of Executed on	Debtor 2 MM / DD / YYYY

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 7 of 60

Debtor 1 Elizabeth B Je First Name Middle Nam		Case number (if known)_	
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in the to proceed under Chapter 7, 11, 12, or 13 cavailable under each chapter for which the	is petition, declare that I have info of title 11, United States Code, ar person is eligible. I also certify th	formed the debtor(s) about eligibility nd have explained the relief hat I have delivered to the debtor(s)
If you are not represented by an attorney, you do not need to file this page.	the notice required by 11 U.S.C. § 342(b) a knowledge after an inquiry that the information	tion in the schedules filed with the	
	Signature of Attorney for Debtor	Date	MM / DD /YYYY
	Printed name		
	Firm name		
	Number Street		
	City	State	ZIP Code
	Contact phone	Email address	s

State

Bar number

Elizabeth B Jennings	Elizab	eth E	3 Jenn	ings
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First Name Middle Name Last Name

Case number (if known)_____

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious a consequences?	ction with long-te	rm financial and legal
□ No ☑ Yes		
Z res		
Are you aware that bankruptcy fraud is a serious criminaccurate or incomplete, you could be fined or impris	•	bankruptcy forms are
□ No ☑ Yes		
Did you pay or agree to pay someone who is not an a No	ttorney to help yo	ou fill out your bankruptcy forms?
Yes. Name of Person		·
Attach Bankruptcy Petition Preparer's Notice, De	eclaration, and Sig	nature (Official Form 119).
By signing here, I acknowledge that I understand the have read and understood this notice, and I am aware attorney may cause me to lose my rights or property i	e that filing a banl	cruptcy case without an
Signature of Debtor 1	Signature of De	btor 2
Date 0//3/2019	Date	MM / DD / YYYY
Contact phone	Contact phone	
Cell phone	Cell phone	
Email address	Email address	

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA P E T I T I O N W O R K S H E E T

DEBTOR	R: 19-00087-3F3 : JENNINGS, ELIZABETH B
	: 01/14/2019 CASE TYPE: I COUNTY: 12031: JACKSONVILLE FIRST FLOOR [0] 300 NORTH HOGAN ST. SUITE 1-200 JACKSONVILLE, FL 32202
TRUSTEE	: [NEWAY, DOUG]
WHEN	: MONDAY FEBRUARY 25, 2019 AT 10:30 a.m. [42]
DEBTOR'S AT	TTY.: PROSE
MATRIX	INST. APP 20 LRG UNSEC. MATRIX (CH 11)
MATRIX ON I	DISK 445 SOAR
PRO SE	10 LRG UNSEC. LIST (CH 11)
DISC. OF CO	DMP
F	EXHIBIT "A" (REQUIRED IF DEBTOR IS A CH 11 CORPORATION)
	SUMMARY OF SCHEDULES
	SCHEDULES A- J (INDICATE UNDER COMMENTS IF ANY ARE MISSING)
	DECLARATION UNDER PERJURY
	STATEMENT OF FINANCIAL AFFAIRS
	CH 7 STATEMENT OF INTENTIONS
<u> 40</u>	CHAPTER 13 PLAN
COMMENTS:	A
_	Defi plan
CLAIMS BAR Fee informa	
Total ->	\$0.00

Fill in this i	nformation to identify ye	our case:		
Debtor 1				
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	District	of	
Case number	(If known)	<u> </u>		Check if this is an
	TO RECEIVE	<u></u>		amended filing
Official I	Form 106Sum			
Summa	ry of Your Ass	ets and Li	abilities and Certain Statistical In	formation 12/15
information. your original	Fill out all of your sched	lules first; then co a new <i>Summary</i> a	ed people are filing together, both are equally responsible omplete the information on this form. If you are filing amer and check the box at the top of this page.	
		_		
				Your assets Value of what you own
1. Schedule	A/B: Property (Official For	m 106A/B)		
				\$ <u>166,650.00</u>
1b. Copy li	ne 62, Total personal pro	perty, from Schedu	ile A/B	\$ 85,708.03
1c. Copy li	ne 63, Total of all property	y on Schedule A/B		s 252,358.03
			***************	Ψ
Part 2: Si	ummarize Your Liabil	lities	•	
				
				Your liabilities Amount you owe
		· · · · · · · · · · · · · · · · · · ·	Property (Official Form 106D) laim, at the bottom of the last page of Part 1 of Schedule D	\$ <u>282,623.00</u>
	E/F: Creditors Who Have		·	s 0.00
3a. Copy ti	he total claims from Part 1	(priority unsecure	d claims) from line 6e of Schedule E/F	\$\$
3b. Copy ti	ne total daims from Part 2	? (nonpriority unsec	cured claims) from line 6j of Schedule E/F	+ \$ 65,243.77
			Your total liabilit	\$ 347,866.83
Part 3: Si	ummarize Your Incon	ne and Expense	PS	
. 0.1		4001		
	: Your Income (Official For combined monthly incom		Chedule I	\$ <u>3,793.10</u>
	•			
	<i>J:</i> Your Expenses (Official monthly expenses from it	•	n 1	2,705.00

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 11 of 60

Debtor 1 Case number (ir known)_ First Name Middle Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income; Copy your total current monthly income from Official 1,293.89 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 58,951.00 9d. Student loans. (Copy line 6f.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

58,951.00

Fill in this information to identify your case and thi	s filing:	
Dahlor 1 Elizabeth B Jennings		
Debtor 1 First Name Middle Name	Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name	
United States Bankruptcy Court for the: Middle District of FI	CONTROL OF THE CONTRO	
, ,	onua <u>ma</u>	
Case number		☐ Check if this is an
		amended filing
Official Form 106A/B		
Schedule A/B: Propert	У	12/15
Do you own or have any legal or equitable interes	ore space is needed, attach a separate sheet to the ver every question. Land, or Other Real Estate You Own or Have	is form. On the top of any additional pages,
✓ No. Go to Part 2. ✓ Yes. Where is the property?		
1.1. 7134 Electra Drive South	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule Dicreditors Who Have Claims Secured by Property.
Street address, if available, or other description	Condominium or cooperative	Current value of the Current value of the
	Manufactured or mobile home	entire property? portion you own?
	Land	\$161,650.00
Jax FI 32210	☐ Investment property ☐ Timeshare	Describe the nature of your ownership
City State ZIP Code	Other	interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
	Who has an interest in the property? Check one.	Fee Simple
Duval	Debtor 1 only	Tee Simple
County	Debtor 2 only	
	Debtor 1 and Debtor 2 only	☐ Check If this is community property (see instructions)
	At least one of the debtors and another	•
	Other information you wish to add about this it property identification number:	em, such as local
If you own or have more than one, list here:		
	What is the property? Check all that apply.	Do not deduct secured cleims or exemptions. Put
1.2. 0 Mimosa Grove Trail	Single-family home	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
Street address, if available, or other description	☐ Duplex or multi-unit building☐ Condominium or cooperative	AMABURAN BURAN BURAN BURAN BURAN BUR
	Manufactured or mobile home	Current value of the entire property? Current value of the portion you own?
	⊠ Land	\$ 5,000.00 \$ 5,000.00
Jax FL 32210	☐ Investment property	Donath the material form
City State ZIP Code	☐ Timeshare	Describe the nature of your ownership interest (such as fee simple, tenancy by
	Other	the entireties, or a life estate), if known.
	Who has an interest in the property? Check one. Debtor 1 only	
Duval	Debtor 1 only Debtor 2 only	
County	Debtor 1 and Debtor 2 only	☐ Check if this is community property
	At least one of the debtors and another	(see instructions)
	Other information you wish to add about this ite	m, such as local
	property identification number: Vacant lands	

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 13 of 60 Elizabeth B Jennings Case number (# known)

Last Name

1.3.	Street address, if available	e, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured ck the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on <i>Schedule D:</i>
			Manufactured or mobile home	ee property.	position you arrive
			Land	3	\$
			☐ Investment property	Describe the neture :	af .ca.m anmarahin
	City	State ZIP Code		Describe the nature of interest (such as fee	
			☐ Other	the entireties, or a lif	
			Who has an interest in the property? Check one.		
			Debtor 1 only		
	County		Debtor 2 only	_	
			Debtor 1 and Debtor 2 only		mmunity property
			lacksquare At least one of the debtors and another	(see instructions)	
			Other information you wish to add about this lite property identification number:	em, such as local	
			all of your entries from Part 1, including any entrie		s 161,650.00
you l	have attached for Part	1. Write that number	here	→	
art 2:	Describe Your	Vehicles			
o you (own, lease, or have leg that someone else drive , vans, trucks, tractors o es Make:	gal or equitable interess. If you lease a vehicle, sport utility vehicle	Who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured classes the amount of any secure	aims or exemptions. Put d claims on <i>Schedule D</i> :
Oo you (ou own . Cars, □ N ☑ Y	own, lease, or have leg that someone else drive , vans, trucks, tractors o es Make: Model:	gal or equitable interests. If you lease a vehicle sport utility vehicle Mercedes ML320	tile, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one. Debtor 1 only	and Unexpired Leases. Do not deduct secured cla	aims or exemptions. Put d claims on <i>Schedule D</i> :
Oo you (ou own . Cars, □ N ☑ Y	own, lease, or have leg that someone else drive , vans, trucks, tractors o es Make:	gal or equitable interests. If you lease a vehicle, sport utility vehicle Mercedes ML320 2002	tile, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cle the amount of any secure Creditors Who Have Cleir Current value of the	aims or exemptions. Put d claims on Schedule D: ms Secured by Property, Current value of the
Oo you (ou own . Cars, □ N ☑ Y	own, lease, or have leg that someone else drive , vans, trucks, tractors o es Make: Model:	gal or equitable interests. If you lease a vehicle sport utility vehicle Mercedes ML320	tile, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one. Debtor 1 only	and Unexpired Leases. Do not deduct secured classes the amount of any secure Creditors Who Have Clair	alms or exemptions. Put d claims on Schedule D: ms Secured by Property.
Oo you (ou own . Cars, □ N ☑ Y	that someone else drive , vans, trucks, tractors o es Make: Model: Year:	gal or equitable interests. If you lease a vehicle, sport utility vehicle Mercedes ML320 2002	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
Oo you (ou own . Cars, □ N ☑ Y	that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage:	mal or equitable interests. If you lease a vehicle sport utility v	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cle the amount of any secure Creditors Who Have Cleir Current value of the	aims or exemptions. Put d claims on Schedule D: ms Secured by Property, Current value of the
Oo you Cou own Cars, N Y 3.1.	that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: Other information: VIN#4JGAB54E3	Mercedes ML320 2002 276000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
Oo you count own Cars, N Y 3.1.	that someone else driven vans, trucks, tractors of es Make: Model: Year: Approximate mileage: Other information: VIN#4JGAB54E3 Needs a catalytic own or have more than	Mercedes ML320 2002 276000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured classes. Do not deduct secured classes the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 500.00	aims or exemptions. Put d claims on Schedule D: ms Secured by Propeny. Current value of the portion you own? \$ 500.00
Oo you Cou own Cars, N Y 3.1.	that someone else drive that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: Other information: VIN#4JGAB54E3 Needs a catalytic own or have more than	Mercedes ML320 2002 276000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clause the amount of any secure Greditors Who Have Clair Current value of the entire property? \$ 500.00 Do not deduct secured clause amount of any secure the amount of any secured clause amount of any secured clause the amount of any secured.	aims or exemptions. Put d claims on Schedule D: me Secured by Property. Current value of the portion you own? \$ 500.00 aims or exemptions. Put d claims on Schedule D:
Oo you count own Cars, N Y 3.1.	that someone else driven vans, trucks, tractors of es Make: Model: Year: Approximate mileage: Other information: VIN#4JGAB54E3 Needs a catalytic own or have more than	Mercedes ML320 2002 276000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 500.00	aims or exemptions. Put d claims on Schedule D: me Secured by Property. Current value of the portion you own? \$ 500.00 aims or exemptions. Put d claims on Schedule D:
Oo you count own Cars, N Y 3.1.	that someone else drive that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: Other information: VIN#4JGAB54E3 Needs a catalytic own or have more than	Mercedes ML320 2002 276000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured class amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 500.00 Do not deduct secured clair the amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put diclaims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 500.00 aims or exemptions. Put diclaims on Schedule D: ms Secured by Property. Current value of the
Oo you count own Cars, N Y 3.1.	that someone else drive that someone else drive vans, trucks, tractors o es Make: Model: Year: Approximate mileage: Other information: VIN#4JGAB54E3 Needs a catalytic own or have more than Make: Model:	Mercedes ML320 2002 276000	die, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	Do not deduct secured claim amount of any secure Creditors Who Have Claim Current value of the entire property? \$ 500.00 Do not deduct secured claim the amount of any secure Creditors Who Have Claim Creditors Who Have Claim	aims or exemptions. Put diclaims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 500.00 aims or exemptions. Put diclaims on Schedule D: ms Secured by Property.
Oo you count own Cars, N Y 3.1.	that someone else driven vans, trucks, tractors of es. Make: Model: Year: Approximate mileage: Other information: VIN#4JGAB54E3 Needs a catalytic own or have more than Make: Model: Year:	Mercedes ML320 2002 276000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured class amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 500.00 Do not deduct secured clair the amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put diclaims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 500.00 aims or exemptions. Put diclaims on Schedule D: ms Secured by Property. Current value of the

Debtor 1 Elizabeth B Jennings Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 14 of 60 Case number (# known)

3.3.	Make: Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cla the amount of any secure Creditors Who Have Clain Current value of the entire property?	d claims on Schedule D: as Secured by Property.
3.4.	Make: Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured claims or examptions the amount of any secured claims on Schedu Creditors Who Have Claims Secured by Property Current value of the Current value entire property? portion you or	
	<i>nples:</i> Boats, trailers, motors, personal w lo	Check if this is community property (see instructions) Indicate the community property (see instructions) Indicate the community property (see instructions)		\$
4.1.	Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cla the amount of any secured Creditors Who Have Clain Current value of the entire property?	d claims on <i>Schedule D:</i>
If you	wown or have more than one, list here: Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cla the amount of any securer Creditors Who Have Clain Current value of the entire property?	claims on Schedule D:
		n for all of your entries from Part 2, including any entrie	· · ·	\$ 500.00

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 15 of 60 Elizabeth B Jennings Case number (if known)______

Part 3:	Describe	Your	Personal and	Household Items

Dx	b you own or have any legal or equitable interest in any of the following items?	Current value portion you ou Do not deduct se	vn?
		or exemptions.	
6.	Household goods and furnishings		
	Examples: Major appliances, furniture, linens, china, kitchenware		
	□ No		
	Yes. Describe Household:Living Room, Dining Room and Bedroom Sets	\$	300.00
7	Electronics	1	
,.	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No		
	Yes. Describe Electronics:2 Televisions, Laptop, DVD player, iPad, and Cell phone	\$	200.00
A	Collectibles of value	ud	
Ŭ.	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles		
	☑ No	7	
	Yes. Describe	\$	
9.	Equipment for sports and hobbies		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No		
	Yes. Describe Sports:Hobby:Golf Clubs anf Tennis Rackets	\$	200.00
40	Firearms	اـ	
10	Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
	✓ No Yes. Describe	\$	
		J	
11	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No		
	✓ Yes. Describe Clothes: Everyday Clothing	\$	25.00
12	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	□ No □ Yes. Describe Jewerly-Watch	\$	50.00
13	Non-farm animals Examples: Dogs, cats, birds, horses	-	
	☑ No		
	Yes, Describe	\$	
14.	Any other personal and household items you did not already list, including any health aids you did not list	•	
	☑ No		
	Yes. Give specific information.	\$	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3, Write that number here	\$	725.00
2020	acococococococococococococococococococo		

Part 4:

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 16 of 60 Elizabeth B Jennings Case number (K known)

Describe Your Financial Assets

Do you own or have any legal or equitable	interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Examples: Money you have in your wallet	, in your home, in a safe deposit box, and on hand when y	ou file your petition	
☑ No □ Yes		Cash:	\$
	ancial accounts; certificates of deposit; shares in credit un you have multiple accounts with the same institution, list		
☐ No ☑ Yes	Institution name:		
17.1. Checking account of the control of the contro	count: ount: ount: of deposit: iial account: iial account: iial account: iial account: iial account: iial account:) YX8G	\$\$ \$\$ \$\$ \$\$
No ☐ Yes Institution or issu	•		\$ \$ \$
an LLC, partnership, and joint venture ☐ No ☐ No ☐ Name of entity: ☐ Yes. Give specific ☐ LegalDocsby		% of ownership: 10,000% %	\$
them Deptor opera	ates as her business as sole-proprietorship an LLC is registered with state of FL	0% %	\$ \$

	5		
20.		ate bonds and other negotiable and non-negotiable instrume	
		clude personal checks, cashiers' checks, promissory notes, and r ofs are those you cannot transfer to someone by signing or deliver	
	-		
	No No		
	☐ Yes. Give specific	Issuer name:	
	information about them		\$
	410111		
			Ψ
			\$
21.	Retirement or pension		
		A, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other	pension or profit-sharing plans
	☑ No		
	Yes. List each	- • • • • • • • • • • • • • • • • • • •	
	account separately.	Type of account: Institution name:	
		401(k) or similar plan:	<u> </u>
			_
		Pension plan:	\$
		IRA:	<u> </u>
		Retirement account:	\$
		Keogh:	<u> </u>
		Additional account:	\$
		Additional account:	\$
22.	Security deposits and p	repayments	
	· · · · · · · · · · · · · · · · · · ·	deposits you have made so that you may continue service or use	from a company
		ith landlords, prepaid rent, public utilities (electric, gas, water), tele	ecommunications
	companies, or others		
	☑ No		
	☐ Yes	Institution name or individual:	
		Electric:	•
			\$
		Gas:	
		Heating oil:	\$
		Security deposit on rental unit:	\$
		Prepaid rent:	
		Telephone:	<u> </u>
			\$
		Water:	
		Rented furniture:	
		Other:	s
			Ψ
	_		
23.	•	a periodic payment of money to you, either for life or for a number	of years)
	☑ No		
	☐ Yes	Issuer name and description:	
		•	\$
			•
			W D

je 18 of 60

	Climals atta	Case 3:1	9-bk-00087-JAF	Doc 1	Filed 01/14/19	Pag
Debtor 1	Elizabeth	B Jennings			Case nu m be	r (il' known)_
	First Name	Middle Name	í asi Name			

24.	Interests in an education IRA, in an ac 26 U.S.C. §§ 530(b)(1), 529A(b), and 529	count in a qualified ABLE program, or under a qualified 9(b)(1).	state tuition program.	
	☑ No			
	YesInstitution	name and description. Separately file the records of any int	terests.11 U.S.C. § 521(c)	ľ.
				\$
				\$
				\$
2 5.	Trusts, equitable or future interests in exercisable for your benefit	property (other than anything listed in line 1), and rights	s or powers	
	☑ No			
	Yes. Give specific information about them		and an analysis of the second sec	\$
26.		secrets, and other intellectual property ites, proceeds from royalties and licensing agreements		
	□ No			
	Yes. Give specific information about them Intellects	ual: Domain Name csbyLiz		\$0.00
27.	Licenses, franchises, and other gener	al intangibles enses, cooperative association holdings, liquor licenses, pro	forcional licenses	-
	Z No	enses, cooperative association noidings, liquor licenses, pro	ressional ricerises	
	Yes. Give specific			· ·
	information about them			\$
Mo	ney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	□ No			
	Yes. Give specific information about them, including whether		Federal: \$	<u> </u>
	you already filed the returns		State: \$	<u> </u>
	and the tax years		Local: \$	<u> </u>
			and the second s	
29.	Family support Examples: Past due or lump sum alimony □ No	, spousal support, child support, maintenance, divorce settle	ement, property settlemen	ıt
		Child support arrears owed to Debtor by ex husband	Alimony:	\$
			Maintenance:	\$
			Support:	\$ 84,000.00
			Divorce settlement: Property settlement;	\$
	- 4		i topetty settlement,	*
30.	Other amounts someone owes you Examples: Unpaid wages, disability insur Social Security benefits; unpa	ance payments, disability benefits, sick pay, vacation pay, vid loans you made to someone else	workers' compensation,	
	☑ No		IN IR ROBERTO BOTH A THE ATTE WHEN THAN SOMEWHATER A PROPERTY AND A PROPERTY OF THE PROPERTY O	pers
	Yes. Give specific information			S
		The state of the s		-

Elizabeth B Jennings Doc 1 Filed 01/14/19 Page 19 of 60 Case number (if known)

$kenter x_{1}, x_{2}, x_{3}, x_{4}, x_{5}, $	Service and the service of the servi	Mark Arthres Mark Arthres Control to a fort for the graph of properties of the prope	garaga renda enda enda enda enda enda enda enda
31. Interests in insurance policies	•		
•	ice; health savings account (HS	SA); credit, homeowner's, or renter's insurance	
□ No			
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
• •			\$
			\$
			<u> </u>
			¥
32. Any interest in property that is due you If you are the beneficiary of a living trust, e property because someone has died.		I trance policy, or are currently entitled to receive	
☑ No			A-4.
☐ Yes. Give specific information			
	AND THE RESERVE AND ADDRESS OF THE AND THE WAS THE THE THE A. S.	***************************************	\$
33. Claims against third parties, whether or Examples: Accidents, employment disputeNo	=		
Yes. Describe each claim			
			\$
34. Other contingent and unliquidated claim to set off claims	ns of every nature, including	counterclaims of the debtor and rights	
No State Sta	***************************************		
Yes. Describe each claim			\$
*w			
35. Any financial assets you did not already	list		
☑ No	dentition of the second of the		
Yes, Give specific information			s
i.			
36. Add the dollar value of all of your entrie	s from Part 4, including any	entries for pages you have attached	
•		→	\$84,893.00
AND THE STREET S	energy was properly and the second control of the second control o	LE LECTRON NAMES CONTRACTOR (C. C. C	
Part 5: Describe Any Business-	Related Property You (Own or Have an Interest In. List any r	eal estate in Part 1.
37. Do you own or have any legal or equitab	ole interest in any business-r	elated property?	
No. Go to Part 6.			
Yes. Go to line 38.			
	·		Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Accounts receivable or commissions yo	ou already earned		
□ No	•		
☐ Yes, Describe	gydg ysgan achdd o conno a chonro a Chonro a Chonro a Chonro a garafail gall a c honro a <mark>chonro a chonro a chonro</mark>		1
			J\$
39. Office equipment, furnishings, and supp	olies		
• • • • • • • • • • • • • • • • • • • •		achines, rugs, telephones, desks, chairs, electronic devices	
☐ No			~1
☐ Yes. Describe			s
Secretary and the secretary secretar			

Debtor 1	Elizabeth	Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Pag Case number (# Known)	e 20 of 60	
	First Name	Middle Name Last Name		
	ery, fixtures, o	equipment, supplies you use in business, and tools of your trade		
□ No			gagagagagaanan aran aran aran aran dan dan dan dalah dak	1
	Describe			s
			eri di la manuscria i di manuscria della 10° (0° 20° 101) (1° 20° 101)	.[
1. Inventor	v			
No No				1
Yes.	Describe			\$
			enagement accommunity accommunity and the Medical Medi	d
2. Interests	s in partners!	nips or joint ventures		
□ No				
☐ Yes.	Describe	Name of entity: %	of ownership:	
			%	\$
			%	\$
			%	\$
D. Cuete es	listaIII	ng lists, or other compilations		
D No	er nata, maini	ng lists, or other compliations		
	Do your lists	s Include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	☐ No			
	Yes. Des	cribe	a tanana a tanan a tan	•
				\$
4. Anv bus	iness-related	property you did not already list		
☐ No		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Give specific			\$
intori	mation			\$
			-	¢
				3
				\$
				\$
				_\$
5. Add the	dollar value	of all of your entries from Part 5, including any entries for pages you have attach	ed	
for Part	5. Write that	number here	→	Φ
er a derengang gang garan and da		DEFECTION OF THE STATE OF THE S		Tinni geniawa
Part 6:		Iny Farm- and Commercial Fishing-Related Property You Own or Have a or have an interest in farmland, list it in Part 1.	an Interest In	•
	II you own o	There are all alleres in farmand, not it in rait 1.		
6. Do you d	own or have a	any legal or equitable interest in any farm- or commercial fishing-related property	17	
M No. 0	Go to Part 7.			
☐ Yes.	Go to line 47.			
				Current value of the
				portion you own? Do not deduct secured claims
				or exemptions.
7. Farm an Example		poultry, farm-raised fish		
Example □ No	a. Livealock,	youthy, territrialed field		
				1
, , , , .				_
				\$

Debtor 1 Elizabeth	Case 3:19-bk-00087-JAF	Doc 1		L4/19 Page 21 of	f 60		
First Name	MAQUE NAME LASTINAME						
48. Crops—either grow	ing or harvested						
☐ No☐ Yes. Give specific			variananananah Madiah (440-140-1444)				
information		NY TOTANIN'S NY TRONG TO THE STATE OF THE ST				\$	
	puipment, implements, machinery, fixtur	es, and too	s of trade				
☐ No ☐ Yes							
				IN IN IN INSINI IN		\$	
50. Farm and fishing su	pplies, chemicals, and feed						
☐ No ☐ Yes			,				
a res	110					\$	
51. Any farm- and comr	mercial fishing-related property you did			(1000 V V V V V V V V V V V V V V V V V V		_	
☐ No☐ Yes. Give specific			and the second s	In M Maha manuman			
information						\$	
	e of all of your entries from Part 6, inclu	ding any en	tries for pages	you have attached	[<u> </u>	
for Part 6. Write tha	t number here	*************************			.→ [
Part 7: Describe	All Property You Own or Have	an Inter	est in That	You Did Not List Abo	ove		
	property of any kind you did not already	list?					
Examples: Season ticke	ts, country club membership		o so	1944 A 1814 M M M M M M M M M M M M M M M M M M M	7		:
Yes. Give specific						\$	
iniormation	en proprieta de la companya del companya de la companya del companya de la compan					\$ \$	·
					_i 		
54. Add the dollar value	of all of your entries from Part 7. Write	that number	r here		.→	\$	0.00
AND THE PART OF TH	DANG SPERMANANAN GANG KRAMBARAN SPERMAN SPERMAN SPERMAN SPERMAN BARBARAN SPERMAN SPERMAN SPERMAN SPERMAN SPERMA	**************************************					PPPRPPIRPRIE
Part 8: List the	Totals of Each Part of this For	m 			_		
55. Part 1: Total real est	tate, line 2				→	s16	66,650.00
56. Part 2: Total vehicle	s, line 5	\$	500.00		1		***************************************
57. Part 3: Total person	al and household items, line 15	\$	725.00				:
58. Part 4: Total financia	al assets line 36	\$	84,983.00				
	ss-related property, line 45	¢	0.00				
		\$	0.00				
	nd fishing-related property, line 52	\$					
61. Part 7: Total other p	roperty not listed, line 54	+\$	0.00		£		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
62. Total personal prop	erty. Add lines 56 through 61	. \$	85,708.00	Copy personal property tot	al 🗲	+ \$	85,708.00
		<u> </u>			: T		
63. Total of all property	on Schedule A/B. Add line 55 + line 62	••••••	·····			\$2	52,358.00
					L		

	Case 3:19-bk-00	0087-JAF Doc	1 Filed 01/	14/19 Page 2	2 of 60
Fill in this in	formation to identify your case:				
Debtor 1	Elizabeth B Jennings				
Debtor 2	First Name Middle Name	Last Name			
(Spouse, if filing		Last Name	888		
	Bankruptcy Court for the: Middle District	of Florida			D a 1 2 2 3 3 3 3 3 3 3 3 3 3
Case number (if known)					☐ Check if this is an amended filing
	orm 106C lule C: The Pro	perty You	Claim a	s Exempt	04/16
Using the prop space is need	te and accurate as possible. If two moerty you listed on Schedule A/B: Proed, fill out and attach to this page as dicase number (if known).	perty (Official Form 106	A/B) as your sourc	e, list the property that	you claim as exempt. If more
of any applications of any	r amount as exempt. Alternatively able statutory limit. Some exemptinds—may be unlimited in dollar armountion to a particular dollar amounted to the applicable statutory am	ons—such as those fo nount. However, if you int and the value of the	r health aids, righ claim an exempt	ts to receive certain t on of 100% of fair ma	penefits, and tax-exempt rket value under a law that
Part 1:	dentify the Property You Clair	n as Exempt			
🗹 You a	et of exemptions are you claiming? are claiming state and federal nonbar	kruptcy exemptions. 11	=		
You a	are claiming federal exemptions. 11	J.S.C. § 522(b)(2)			
2. For any p	property you list on Schedule A/B	that you claim as exem	ıpt, fill in the info	mation below.	· ·
	scription of the property and line on le A/B that lists this property	Current value of the portion you own	Amount of the	xemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one I	oox for each exemption.	
Brief description	2002 Mercedes 320	\$ <u>500.00</u>	☑ \$ <u>500.00</u>		Fla. Stat. Ann. §222.25(4)
Line fron Schedule	1 21			market value, up to ble statutory limit	

		on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim.	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption,	
	Brief	2002 Mercedes 320	\$500.00	☑ \$ <u>500.00</u>	Fla. Stat. Ann. §222.25(4)
	Line from Schedule A/B:	3.1		☐ 100% of fair market value, up to any applicable statutory limit	
	Brief description:	Household:L.D.B sets	\$ <u>300.00</u>	≥ \$ 300.00	Fla. Const. art. X, §4(a)(2)
	Line from Schedule A/B:	6.1		■ 100% of fair market value, up to any applicable statutory limit	
	Brief description:	Other Financial Acct	\$ <u>0.00</u>	2 \$ 0.00	Fia. Const. art. X, §4(a)(2)
	Line from Schedule A/B:	17.3		■ 100% of fair market value, up to any applicable statutory limit	
3.	-	ng a homestead exemption o	•	es filed on or after the date of adjustment.)
	☑ No	,	,		,
	Yes. Did you	u acquire the property covered	by the exemption within	1,215 days before you filed this case?	
	☐ Yes				

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 23 of 60

Debtor 1 Elizabeth

Elizabeth	В	Jennings
-----------	---	----------

Last Name

Case number (# known)	
4 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

Part 2:

Additional Page

Brief description on Schedule A	on of the property and line /B that lists this property	Current value of the portion you own Copy the value from Schedule WB	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description:	Child Support by Ex	\$ <u>84,000.00</u>	\$ 84,000.00	Fla Stat. Ann. § 222.201; 11 U.S.C. § 522(d)(10)(D)
Line from Schedule A/B:	29.1		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	. 17
Brief description:		\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□\$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	

		ago 24 or			
Fill in this information to identify your cas	e:				
Debtor 1 Elizabeth B Jennings					
First Name Middle N	lame Last Name				
(Spouse, if filing) First Name Middle N	ame Last Name				
United States Bankruptcy Court for the: Middle Di	strict of Florida				
Case number			п	Check if this	o io an
(If known)				amended fil	
					Ū
Official Form 106D					
Schedule D: Creditor	s Who Have Claims Secure	ed by Prop	erty		12/15
	, , ,				
_ '	n to the court with your other schedules. You have noth	ng else to report on t	his form.		
Yes. Fill in all of the information below.					
Part 1: List All Secured Claims					
		Column A	Column B	a e e e e e e e e e e e e e e e e e e e	lann C
for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. labetical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral	Value of co that suppo claim	Hateral Un	secured rtion
2.1 Michael Corrigan Tax Collect	Describe the property that secures the claim:	s 718.79	c 5,0	00.00	0.00
Michael Corrigan Tax Collect Creditor's Name	личен на вышения при выправления при		Φ		
231 E Forsyth Street	0 Mimosa Grove Trail Jax FL 32210				
Number Street Suite 130	As of the date you file, the claim is: Check all that apply.				
	☐ Contingent				
Jacksonville FL 32210 City State ZIP Gode	Unliquidated Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mortgage or secured)				
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)				
At least one of the debtors and another	Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	_			
community debt	Last 4 digits of account number 0 0 0 0				
Date debt was incurred 01/01/2014		s 556.13	5.0	2 00.00°	0.00
Micharl Corrigan Tax Collect Creditor's Name	Describe the property that secures the claim:	\$ <u>556.13</u>]	\$	100.00 \$	0.00
231 E Forsyth Street	0 Mimosa Grove Trail Jax FL 32210				
Number Street Suite 130	As of the date you file, the claim is: Check all that apply.				
	☐ Contingent				
Jacksonville FL 32210 City State ZIP Code	Unliquidated Disputed				
Who owes the debt? Check one.	Nature of Ilen. Check all that apply.				
Debtor 1 only	An agreement you made (such as mortgage or secured				
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit				
_	Other (including a right to offset)	_			
☐ Check if this claim relates to a community debt					
Date debt was incurred 01/01/2015	Last 4 digits of account number 0 0 0 0		-		
Add the dollar value of your entries in o	Column A on this page. Write that number here:	\$		210111141111111111111111111111111111111	

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 25 of 60

Elizabeth B Jennings Case number (if known) Debtor 1 First Name Last Name Column A Column B **Additional Page** Value of collateral Amount of claim Unsecure Part 1: After listing any entries on this page, number them beginning with 2.3, followed that supports this dection Do not deduct the by 2.4, and so forth. value of collaters 547.60 0.00 5,000.00 Michael Corrigan Tax Collect Describe the property that secures the claim: Creditor's Name 231 E Forsyth Street 0 Mimosa Grove Trail Number Jax FL 32210 Suite 130 As of the date you file, the claim is: Check all that apply. 32210 Contingent Jax FL ZIP Code ☐ Unliquidated City State Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred 01/01/2016 Last 4 digits of account number 0 0 0280,252.00 161,650.00 , 18,602.00 Seterus Describe the property that secures the claim: Creditor's Name P Q Box 1077 7134 Electra Dr S Jax, FL 32210 Duval Cty Number As of the date you file, the claim is: Check all that apply. Contingent 06143 Hartford Unliquidated ZIP Code □ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. ■ Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car toan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit Other (including a right to offset) Mortgage ☐ Check if this claim relates to a community debt Date debt was incurred 01/20/2004 Last 4 digits of account number _4 Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent City ZIP Code ■ Unliquidated State Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Statutory llen (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number

Write that number here:

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 26 of 60

Debtor 1

Part 2:

Elizabeth B Jennings

First Name Middle Name

Last Name

List Others to Be Notified for a Debt That You Already Listed

Case number (if known)_

ag yo	ency is trying to collect from you for a deb	t you owe to le debts that	someone else, list the you listed in Part 1, fi	e debt that you already listed in Part 1. For example, if a collection o creditor in Part 1, and then list the collection agency here. Similarly, if st the additional creditors here. If you do not have additional persons to
	Ghidotti/Berger LLP			On which line in Part 1 did you enter the creditor? $\frac{2.5}{}$
	Name			Last 4 digits of account number 1 9 3 8
	Attorneys for Plaintiff			·
	Number Street			- # 2
	305 Biscayne Blvd #402	<u> </u>		· .
	Miami	FL	33175	
	City	State	ZIP Code	
	Capital One CLTRL	TO THE PROPERTY OF THE PROPERT		On which line in Part 1 did you enter the creditor? 2.2
	Name			Last 4 digits of account number 3 0 0 0
	PO Box 54418			
	Number Street			
	New Orleans	LA	70154	
	City	State	ZIP Code	
Ť		CO-COMMON COMMON	en imminen certain sent at seelants ant ant ant en tertain ant entrant ant as tent act collection in the first	On which line in Part 1 did you enter the creditor? 2.5
	Citimortgage, Inc.			Last 4 digits of account number _ 0 _ 0 _ 0
	Name 1200 South Pine Island Road			Last 4 digits of account number 0 0 0 0
	Number Street	_		
				•
	Fort Lauderdale City	FL State	33324 ZIP Code	e i
·	City	State	ZIF Code	
	Florida Tax Lien Assets IV, LLC			On which line in Part 1 did you enter the creditor? $\frac{2.1}{2.1}$
	Name			Last 4 digits of account number 4 0 0 0
	2055 US Highway 1 Number Street			
	Number Street			
	Vero Beach	FL FL	32960	
	City	State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
	Name			Last 4 digits of account number
	Number Street			
	City	State	ZIP Code	
T		t Anti-Anti-Lauren aus der Gestelle der Gestelle der Anti-Anti-Anti-Anti-Anti-Anti-Anti-Anti-		On which line in Part 1 did you enter the creditor?
	Name			Last 4 digits of account number
		_		
	Number Street	_		
		_		2 8
				#
	City	State	ZIP Code	

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 27 of 60 Fill in this information to identify your case: Elizabeth B Jennings Debtor 1 Debtor 2 Middle Name (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: Middle District of Florida Check if this is an amended filing (If known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). List All of Your PRIORITY Unsecured Claims Part 1: 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Nonpriority 2.1 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other. Specify □ No Yes 2.2 Last 4 digits of account number _ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. □ Contingent ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government ■ At least one of the debtors and another Claims for death or personal injury while you were ☐ Check if this claim is for a community debt intexicated Other. Specify Is the claim subject to offset? ☐ No ☐ Yes

Elizabeth BQanangs19-bk-00087-JAF Doc 1 Filed 01/24/19 Page 28 of 60 Middle Name

listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Non emc
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
Cily State ZIP Code	☐ Contingent☐ Unliquidated☐			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	Taxes and certain other debts you owe the government			
_	Claims for death or personal injury white you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
is the claim subject to offset?				
□ No □ Yes				
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	***			
lumber Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
Dity State ZIP Code	.☐ Contingent ☐ Unliquidated			
only State Zir Code	Disputed			
Who incurred the debt? Check one.	_ 5.050.00			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government			
	 Claims for death or personal injury while you were intoxicated 			
Check if this claim is for a community debt	Other. Specify			
s the claim subject to offset?				
☑ No ☑ Yes				****
triority Creditor's Name	Last 4 digits of account number	\$	\$	\$
-	When was the debt incurred?			
lumber Street	As of the date you file, the claim is: Check all that apply.			
	Contingent			
Cily State ZIP Code	☐ Unliquidated			
	☐ Disputed			
Vho incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			CONTRACORACIO
s the claim subject to offset?	Other. Specify			
S the claim subject to offset?				

Elizabeth BCARING 19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 29 of 60

3.	Do any creditors have nonpriority ur No. You have nothing to report in the Yes				idenidied	
4	nonpriority unsecured claim, list the cre	ditor sepai ditor holds	rately for each cla	al order of the creditor who holds each claim. If a creditor has im. For each claim listed, identify what type of claim it is. Do not i, list the other creditors in Part 3.If you have more than three no	list çla	ims already
	_			[1]	Tota	d claim
4.1	Credit First National Assoc			Last 4 digits of account number 8 4 8 2		1,467,00
	Nonpriority Creditor's Name Attn:BK Credit Operations PO	Box 813	315	When was the debt incurred? 08/15/2011	S	1,407.00
	Number Street Cleveland City	OH State	44181 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only			☐ Contingent ☐ Unliquidated ☐ Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another	-		☐ Student loans		
	Check if this claim is for a communication	nity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	is the claim subject to offset? ☑ No			Debts to pension or profit-sharing plans, and other similar debts Other. Specify Charge Acct		
	Yes	 			*************	
4.2	Credit One Bank Na			Last 4 digits of account number $\frac{7}{05/19/2016}$	\$	300.00
	Nonpriority Creditor's Name PO Box 98873 Number Street			When was the debt incurred? U5/19/2016		
	Las Vegas	NV	89193	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed		
	Debtor 2 only		,	Turn of NONDDIODITY uncontrol elemen		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans		
	Check if this claim is for a commu			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset? ☑ No ☐ Yes			☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	ı	
4.3	CW Nexus Credit Holding			Last 4 digits of account number 0 7 4 8		539.89
	Nonpriority Creditor's Name PO Box 10368			When was the debt incurred? 03/02/2016	\$	
	Number Street Greenville City	SC State	29603 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. ### Debtor 1 only			☐ Contingent☐ Unliquidated☐ Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only					
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a commu	nity debt		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce		
	Is the claim subject to offset?	-		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes		·	■ Other. Specify Merrick Bank		

Elizabeth BCasaning 19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 30 of 60

Middle	Nаme	 Las

Part 2:	Your NONPRIORITY	Unsecured	Claims —	Continuation	Page
---------	------------------	-----------	----------	--------------	------

			<u> </u>		
Fed Loan Servicing			Last 4 digits of account number <u>0</u> <u>0</u> <u>0</u> <u>2</u>	_{\$} 58,951.6	
Nonpriority Creditor's Name PO Box 69184			When was the debt incurred? 08/01/1996		
Number Street Harrisburg	PA	17106	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
•			☐ Unliquidated		
Who incurred the debt? Check o	ne.		☐ Disputed		
Debtor 1 only			Tarana NONONO DITTY		
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors and a	nother		U Student loans		
_			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
Check if this claim is for a c	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts		
ls the claim subject to offset?			☑ Other. Specify Educational		
☑ No					
☐ Yes					
LNVN Funding			Last 4 digits of account number 7 1 9	<u>\$ 282</u>	
Nonpriority Creditor's Name			— When was the debt incurred? 02/01/2016		
PO Box 10587			When was the debt incurred? 02/01/2016		
Number Street Greenville	sc	29603	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
			☐ Unliquidated		
Who incurred the debt? Check a —	ne.		☐ Disputed		
Debtor 1 only					
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and a	nother		Student loans		
			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
Check if this claim is for a co	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset?			☑ Other Specify Credit One Bank		
☑ No					
☐ Yes					
Portfolio Recovery		የመጨተው የመመተው መስፈት እን ተመተቀ ተቀ ተመሰር ነው ያለው ነው የመመተው የ	Last 4 digits of account number 2 3 5 3	_{\$} 1,186.	
Nonpriority Creditor's Name					
PO Box 41067		•	When was the debt incurred?		
Number Street Norfolk	VA	23541	As of the date you file, the claim is: Check all that apply.		
NOTIOIK Dity	State	ZJP Code	☐ Contingent		
•			Unliquidated		
Who incurred the debt? Check o	ne.		☐ Disputed		
Debtor 1 only			-		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and a	nother		Student loans		
→ At least one or the dectors and a Check if this claim is for a co Check if this claim is for a co Check if this claim is for a co At least one or the dectors and a At least one or the dector of the de			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	unity west		Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset?			☑ Other Specify Capital One Bank		
☑ No					

Elizabeth BCARRING\$19-bk-00087-JAF Doc 1 Filed 01/24/19 Page 31 of 60

Part 3: List Others to Be Notified About a Debt That You Already Listed

	ordenioro noro, n y	ou do not nave	additional perso	ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name			•	On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		-	☐ Part 2: Creditors with Nonpriority Unsecured Clair
				Last 4 digits of account number
City		State	ZIP Code	<u> </u>
	urago version de la valet de servica trade per de play de la	tie de comment a de company de comment de com		On which entry in Part 1 or Part 2 did you list the original creditor?
Name				_
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
4dillosi	Sugar			Part 2: Creditors with Nonpriority Unsecured Claims
			.	
City		State	ZIP Code	Last 4 digits of account number
1				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured
		,		Claims
2:-		State	ZIP Code	Last 4 digits of account number
City		93636	AF CODE	On which entry in Part 1 or Part 2 did you list the original creditor?
Name				On which entry in Fact 1 of Fact 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Gains
City		Slale	ZIP Code	Last 4 digits of account number
### ***	and the second of the contract		manangangang, sumaman ruma saka saman araw asam-	On which entry in Part 1 or Part 2 did you list the original creditor?
Name				· · · · · ·
	C4			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
	·····			
City		State	ZIP Code	Last 4 digits of account number
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
			· · · · · · · · · · · · · · · · · · ·	Claims
				Last 4 digits of account number
City		State	ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Streel			Part 2: Creditors with Nonpriority Unsecured
				Claims
		State	ZIP Code	Last 4 digits of account number
City		C+-+-		

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a	. Domestic support obligations	6a.	\$	0.00
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
	6e.	. Total. Add lines 6a through 6d.	6e.	\$	0.00
1207-2-11-12-11-12-11-1				Total claim	
Total claims	6f.	Student loans	6f.	Total claim	58,951.00
Total claims from Part 2		Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.		58,951.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority		\$	
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	\$	0.00

Fill in this in	formation to ide	entify your case:			
Debtor	Elizabeth B Jennings				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse If filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court fo	or the: Middle District of Florida			
Case number (If known)					

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for
 example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and
 unexpired leases.

	Person o	r company wit	h whom you	have the contract or lease	State what the contract or lease is for	
2.1		A1. A. BBBBBBBBBB	9788888888888/	*8017***, T4T0060168015TAT5408868666866686601886	3.25440.0000.3100.3550.300.000.000.000.000.000.000.000.	
	Name			,	_	
	Number	Street			_	
Annamanangi	City	Rencommunication and the security of a	State	ZIP Code	TO IN THE PROPERTY OF THE PROPERTY OF THE SECOND SEC	
2.2	Name				_	:
		· · · · · · · · · · · · · · · · · · ·			_	:
	Number	Street			-	
2.3	City		State	ZIP Code se savenissione consideration de consideration	ментериментериметриметринентеритеритеритеритеритеритеритеритеритери	r - dominiosas Good Good Good Good Good (1984 - 1981). Il se recensivas de servici
	Name				_	
	Number	Street			_	:
	City	y are a american recognision of control of the cont	State	ZIP Cade		
2.4						
	Name					:
	Number	Street				
	City		State	ZIP Code		······································
2.5	Name		······································		_	
ANDREAD SALES SALES SALES	Number	Street			_	
CONTRACTOR	City		State	ZIP Code		

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 34 of 60

Debtor 1

Elizabeth B Jennings

.IIZapeui	Duchiniga		
First Name	Middle Name	Lasi Name	

Case number (# known)

		Additional	Page if You Ha	ve More Contracts or Le	ases
**************************************	Persor	or company	with whom you	have the contract or lease	What the contract or lease is for
2 <u>2</u>					
	Name				
	Number	Street			
		04000			
	City		State	ZIP Code	
2					
,	Name				
	Number	Street		,	
	City		State	ZIP Code	
2		nor an enterior and enterior enterior and an extension of an enterior and an extension of a ext	erpresent er er er en	angganganggangangganggangganggang ang a tertaktura a tertak angganggang aktiva ang aktiva ang ang ang ang ang	
	Name				
	Number	Street			
	City		State	ZIP Code	
1	014230014230014830014830014		nsumment a ann eithean na na mainneach de a' fha fha dh' a' dh	ertifelle 1898 flage utstelle utstelle kontreller in henne kriterisch einzstelle son henne kriterisch in den s	
2	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2	PROMORAL CONTRACTOR	от урфиянафургалият аруан артог артог артогат			
	Name				
	Number	Street			
				710.0	
	City	estrikati karazan pana arra arra a	State	ZIP Code	
2	Al				
	Name				
	Number	Street			
	City		State	ZIP Code	
2	errorroret (in exale	***************************************			
	Name				
	Number	Street	<u> </u>		
	City		State	ZIP Code	
*******		NOVESTICATE - CONTROL - CO	r form for the first form for th		

Fill in this information to identify your case:					
Debtor 1	Elizabeth B J	ennings Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: Middle District of Florida					
Case number (If known)					

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

		#4	·····	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	Do you have any codebtors? (If y ☐ No	ou are filing a joint case, do	not list either spouse	as a codebtor.)
	☑ Yes			
	Within the last 8 years, have you Arizona, California, Idaho, Louisial			y? (Community property states and territories include shington, and Wisconsin.)
	✓ No. Go to line 3.			
	☐ Yes. Did your spouse, former s	spouse, or legal equivalent li	ve with you at the time	?
	□ No	, -	,	
				
	Yes. In which community s	tate or territory did you live?		Fill in the name and current address of that person.
	Name of your spouse, former spou	ise, or legal equivalent		
				_
	Number Street			_
	City	State	ZIP Code	-
_	I. O. I	B		- Marian
				or if your spouse is filing with you. List the person
	_	• •		er. Make sure you have listed the creditor on lule G (Official Form 106G). Use Schedule D,
	Schedule E/F, or Schedule G to	-	im robert), or sched	iule G (Official Form 108G). Use Schedule D,
	Schedule Er, or Schedule & to	iiii out Column 2.		
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.1	Victor Jennings			
	Name			Schedule D, line 2.1
	2136 Geneve Street			☐ Schedule E/F, line
	Number Street			Schedule G, line
	Jacksonville	FL	32207	
	City	State	ZIP Cade	
3.2	Viotor Ionningo			
	Victor Jennings	-		Schedule D, line 2.2
	2136 Geneve Street			☐ Schedule E/F, line
	Number Street			Schedule G, line
	Jacksonville	FL	32207	
	City	State	ZIP Code	
3.3	\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \			
	Victor Jennings			Schedule D, line 2.3
	2136 Geneve Street			☐ Schedule E/F, line
	Number Street			Schedule G, line
	Jacksonville	FL	32207	Guiedule G, IIIIe
	City	State	ZIP Code	
	- Commission Commissio			

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 36 of 60

Debtor 1

Elizabeth B Jennings
First Name Middle Name

Case number (# known)_

	Additional Page to Lis	st More Codebtors		
	Golumn 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.4		i P <u>i</u> rker († 20er andriannian annan ann		a soliech die scriedules dan approximation in the second
	Victor Jennings	<u>. </u>		Schedule D, line2.4
	2136 Geneve Street			☐ Schedule E/F, line
Miller on the control of the control	Number Street			☐ Schedule G, line
out of the control of	Jacksonville	FL	32207	
<u> </u>	City	Slate	ZIP Code	
3				Schedule D, line
	Name			☐ Schedule E/F, line
***************************************				Schedule G, line
A stationary	Number Street			G Schedule G, line
ALIBOOM V LAND	City	State	ZIP Code	
3	A STANDAR STAND			
<u> </u>	Name			☐ Schedule D, line
**		•		☐ Schedule E/F, line
	Number Street		-	☐ Schedule G, line
	City	State	ZIP Code	
3				
	Name			☐ Schedule D, line
				☐ Schedule E/F, line
	Number Street			☐ Schedule G, line
			700	
3	City	State	ZIP Code	
	Name			☐ Schedule D, line
	(Valifie			Schedule E/F, line
	Number Street			☐ Schedule G, line
	City	State	ZIP Code	
3				
	Name			☐ Schedule D, line
			_	Schedule E/F, line
	Number Street			☐ Schedule G, line
	City	State	ZIP Code	
3	COLLY		AIT CORE	
<u>[-</u>]	Name	<u> </u>		☐ Schedule D, line
	IValife			☐ Schedule E/F, line
	Number Street			☐ Schedule G, line
.	City	State	ZIP Code	
<u>ت</u> ا				☐ Schedule D. line
	Name			☐ Schedule D, line ☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street			Schedule O, line
	City	State	ZIP Code	

Fill in this information to identif	y your case:			
Debtor 1 Elizabeth B Jenr	ings			
First Name Debtor 2	Middle Name	Last Name		
(Spouse, if filing) First Name	Middle Name	Last Name		
United States Bankruptcy Court for the	: Middle District of Florida			
Case number		_	Check if	this is:
				mended filing
				oplement showing postpetition chapter 13 ne as of the following date:
Official Form 106I	<u> </u>		MM T	DD / YYYY
Schedule I: Yo	ur income			12/15
If you are separated and your spo separate sheet to this form. On the	ouse is not filing with you, he top of any additional pa	, do not include inf	formation about your sp	you, include information about your spouse ouse. If more space is needed, attach a known). Answer every question.
Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employ	red	☐ Employed ☐ Not employed
Include part-time, seasonal, or self-employed work.				
Occupation may include student or homemaker, if it applies.	Occupation	Senior Adviso	or	
	Employer's name	Kelly Service	s Global, LLC	
	Employer's address	999 W. Big B	leaver Road	
		Number Street Ste 401A		Number Street
		0.0 40 17	-	
		Troy	MI 48084	
		City	State ZIP Code	City State ZIP Code
·	How long employed the	ere? <u>5/2017</u>		5/2017
Part 2: Give Details Abou	ıt Monthly İncome			
Estimate monthly income as o	of the date you file this for	·m. If you have nothi	ing to report for any line,	write \$0 in the space. Include your non-filing
spouse unless you are separate If you or your non-filing spouse I	nave more than one employ		ormation for all employers	for that person on the lines
below. If you need more space,	attach a separate sheet to t	this form.	For Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, se deductions). If not paid monthly			^{2.} _{\$} 2,816.00	\$
3. Estimate and list monthly over	ertime pay.		3. + \$	+ \$
4. Calculate gross income. Add			4. \$ 2,816.00	\$

Case number (# known)_

Debtor 1

Elizabeth B Jennings
First Name Middle Name

			For Debtor 1	For Debtor 2 or non-filing spouse	
Сор	y line 4 here	→ 4.	\$_2,816.6		
5. List	all payroll deductions:				•
5a.	Tax, Medicare, and Social Security deductions	5a.	\$ <u> </u>	<u>6</u> \$	
5b.	Mandatory contributions for retirement plans	5b.	\$	<u> </u>	
5c.	Voluntary contributions for retirement plans	5c.	\$	<u> </u>	
5d.	Required repayments of retirement fund loans	5d.	\$		
5e.	Insurance	5e.	\$	<u> </u>	
5f.	Domestic support obligations	5f.	\$	\$	
5g.	Union dues	5g.	\$	<u> </u>	
5h.	Other deductions. Specify:	5h.	+\$	+ \$	
	d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	. 6.	\$317.4	\$	
7. Ca	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <u>2,499.2</u>	<u>\$</u>	
8. List	all other income regularly received:				
8a.	Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ <u>1,293.8</u>	9 \$	
8b.	Interest and dividends	8b.	\$	<u> </u>	
8c.	Family support payments that you, a non-filling spouse, or a dependence regularly receive	ent			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	<u> </u>	
	Unemployment compensation	8d.	\$		
	Social Security	8e.	\$		
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$		
8g.	Pension or retirement income	8g.	\$	\$	
8h.	Other monthly income. Specify:	8h.	+\$	+s	
	d all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$1,293.8	9 \$	
	tulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$3,793.1	0 + \$	= \$ 3,793.10
Incli	te all other regular contributions to the expenses that you list in Sche ude contributions from an unmarried partner, members of your household, ads or relatives.			roommates, and other	
_	not include any amounts already included in lines 2-10 or amounts that are cify:			penses listed in <i>Schedule J.</i>	+ \$
	the amount in the last column of line 10 to the amount in line 11. The ethat amount on the Summary of Your Assets and Liabilities and Certain			_	\$ 3,793.10
¥¥≀Ⅱ	e mai amount on the <i>Summary or rout Assets and Liabilities and Cenain</i> (Siausu	roar miormation, II	каррію 12.	Combined
13. Do	you expect an increase or decrease within the year after you file this	form?	?		monthly income

Fill in this information to identify	your case:				
Debtor 1 Elizabeth B Jennin		Check	if this is:		
First Name Debtor 2	Middle Name Last Name		amended fil	ina	
(Spouse, if filing) First Name	Middle Name Last Name	NAS		_	petition chapter 13
United States Bankruptcy Court for the:	Middle District of Florida			the following	
Case number (If known)		ММ	/ DD / YYYY		
Official Form 106J					
Schedule J: Yo	ur Expenses				12/15
	ossible. If two married people are fili ed, attach another sheet to this form ,				
Part 1: Describe Your Hou	usehold				
1. Is this a joint case?					
☐ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a	separate household?				
□ No					
	e Official Form 106J-2, Expenses for S	Separate Household of Debto	or 2.		
2. Do you have dependents?	□ No			.	
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
Do not state the dependents' names.	·	Daughter		20	U No ☑ Yes
		Son	<u>2</u>	23	□ No
					☑ Yes
					U No □ Yes
					□ No
: :					☐ Yes
			 _		□ No
					☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	☑ No ☐ Yes				
Part 2: Estimate Your Ongo	ing Monthly Expenses			34,727,10000000000000000000000000000000000	
	r bankruptcy filing date unless you a	are using this form as a sur	oplement in :	Chapter 13	case to report
	nkruptcy is filed. If this is a supplem				
Include expenses paid for with no	n-cash government assistance if you	know the value of			
such assistance and have include	d it on Schedule I: Your Income (Off	icial Form 106l.)		Your expe	nses
 The rental or home ownership any rent for the ground or lot. 	expenses for your residence. Include	first mortgage payments an	d 4.	\$	0.00
If not included in line 4:					0.00
4a. Real estate taxes			4a.	\$	0.00
4b. Property, homeowner's, or i	enter's insurance		4b.	\$	0.00
4c. Home maintenance, repair,	and upkeep expenses		4c.	\$	0.00
4d Homeowner's association o	r condominium dues		4d	\$	0.00

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 40 of 60

Debtor 1

Elizabeth B Jennings
First Name Middle Name

Last Name

Case number (if known)_

		Yourexpa	inses
5. Additional mortgage payments for your residence, such as home equity loans	5 .	\$	0.00
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	520.00
6b. Water, sewer, garbage collection	6b.	\$	60.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	500.00
6d. Other, Specify:	6d.	\$	0.00
7. Food and housekeeping supplies	7.	\$	750.00
8. Childcare and children's education costs	8.	\$	0.00
9. Clothing, laundry, and dry cleaning	9.	\$	200.00
10. Personal care products and services	10.	\$	65.00
11. Medical and dental expenses	11.	\$	170.00
12. Transportation. Include gas, maintenance, bus or train fare.			250.00
Do not include car payments.	12.	\$	250.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14. Charitable contributions and religious donations	14.	\$	0.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	34.00
15c. Vehicle insurance	15c.	\$	156.00
15d. Other insurance. Specify:	15d.	\$	0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	0.00
17b. Car payments for Vehicle 2	17Ь.	\$	0.00
17c. Other. Specify: 0	17c.	\$	0.00
17d. Other, Specify; 0	17d.	\$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19. Other payments you make to support others who do not live with you.			
Specify: 0	19.	\$	0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	me.		
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	<u>\$</u>	0.00

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 41 of 60

Debtor 1	Elizabeth B Jennings Cas First Name Middle Name Last Name	e number (# known)		
ı. Ott	ner. Specify:	21.	+\$	0.00
. Cal	culate your monthly expenses.			
228	a. Add lines 4 through 21.	22a.	\$	2,705.00
22b	c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	
220	c. Add line 22a and 22b. The result is your monthly expenses.	22 c.	\$	2,705.00
. Calc	culate your monthly net income.			3 703 10
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,793.10
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,705.00
23 c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23 c.	\$	1,088.10
For	you expect an increase or decrease in your expenses within the year after you file the example, do you expect to finish paying for your car loan within the year or do you expect togage payment to increase or decrease because of a modification to the terms of your modern.	your		
Ø	No.			
□ Y	res. Explain here:			
		,,		

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 42 of 60

Fill in this in	formation to ide	entify your case:		
Debtor 1	Elizabeth B	Jennings		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court f	or the: Middle District of Flori	ida	
Case number (If known)				
(ii kiiQwii)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Did you ☑ No	ı pay or agree to pay someone who is NOT an att	orney to help you fill out bankruptcy forms?
_	. Name of person	. Attach Benkruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	penalty of perjury, I declare that I have read the sery are true and correct.	ummary and schedules filed with this declaration and
<u>*</u> <	×	
Signatu Date 9	13/30/8 M/ DD// YYY	Date

		Case 3:19-bk-0008	7-JAF Doc 1	Filed 01/14/19	Page 43 of 60	
Fill in this in	iformation to i	dentify your case:				
Debtor 1	Elizabeth First Name	B Middle Name	Jennings Last Name			
Debtor 2 (Spouse, if filing)) First Name	Middle Name	Last Name			
United States	Bankruptcy Court	for the: District (of			
Case number (If known)						☐ Check if this is an
L	<u> </u>					amended filing
If two mar You must obtaining	ried people are file this form v	e filing together, both are ed whenever you file bankrupto perty by fraud in connection §§ 152, 1341, 1519, and 357	qually responsible for s cy schedules or amend with a bankruptcy cas	supplying correct information	mation. a false statement, cond	•
	u pay or agree	to pay someone who is NO	T an attorney to help y	you fill out bankruptcy	forms?	!
☑ No	. N			Address Donaton and an One	Was Danie - I. Makis - B	
16:	s. Name of perso	on		Signature (Official For	ition Preparer's Notice, Dec n 119).	larauon, ano
	penalty of perjey are true and	jury, I declare that I have red	ad the summary and s	chedules filed with this	declaration and	
Signat	ure of Debtor 1		Signature of Del	otor 2		
Date_ N	9/13/20/	(3	Date	YYYY		

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 44 of 60

	Ca	SE 3.19-DK-00067-	JAF DUC	T Filed OT	114/19	Page 44 01 00
Fill in this in	formation to ide	ntify your case:				Check as directed in lines 17 and 21:
Debtor 1 Debtor 2 (Spouse, if filing)	Elizabeth B J		Last Name Last Name			According to the calculations required by this Statement: 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
(If known)	-					 3. The commitment period is 3 years. 4. The commitment period is 5 years. Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

P	art 1: Calculate Your Average Monthly Income)				
1.	What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married. Fill out both Columns A and B, lines 2-11.					
	Fill in the average monthly income that you received from bankruptcy case. 11 U.S.C. § 101(10A). For example, if y August 31. If the amount of your monthly income varied duthe result. Do not include any income amount more than or from that property in one column only. If you have nothing	ou are filing on September 15, t ring the 6 months, add the incon nce. For example, if both spouse	he 6-mo ne for al es own th	nth period wo l 6 months an ne same renta	uld be March 1 through d divide the total by 6. Fill in	
			Co/ Debi	umn A or 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, and payroll deductions).	commissions (before all	\$	0.00	\$	
3.	Alimony and maintenance payments. Do not include pay	ments from a spouse.	\$	0.00	\$	
4.	All amounts from any source which are regularly paid f you or your dependents, including child support. Include an unmarried partner, members of your household, your de roommates. Do not include payments from a spouse. Do no listed on line 3.	de regular contributions from ependents, parents, and	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm Gross receipts (before all deductions)	Debtor 1 Debtor 2 §:93.00 §				
	Ordinary and necessary operating expenses	- \$				
	Net monthly income from a business, profession, or farm	\$:93.00 \$ Copy	• • \$_	1,293.00	\$	
6.	Net income from rental and other real property	Debtor 1 Debtor 2				
	Gross receipts (before all deductions)	\$ <u>0.00</u> \$				
	Ordinary and necessary operating expenses	- \$ <u>0.00</u> - \$				
	Net monthly income from rental or other real property	\$ Copy here*	→ \$_	0.00	\$	

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 45 of 60

Debtor 1

Elizabeth	R.	lennings
TIME ON CUIT	\mathbf{p}	oemmiyə.

Middle Name

Lest Name

Case number (#known)_

		Column A Debtor 1	Column B Debtor 2 or	
			non-filing spouse	
7.	Interest, dividends, and royalties	\$0.00	\$	
8.	Unemployment compensation	\$0.00	\$	
	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:			
	For you\$ 0.00			
	For your spouse \$			
9.	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.	\$0.00	\$	
10.	Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.			
		\$0 <u>.00</u>	\$	
		\$0.00	\$	
	Total amounts from separate pages, if any.	+ \$0.00	+ \$	
11.	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$1,293.00 +	\$	= \$ 1,293.00 Total average
				monthly income
В.				
ři	Determine How to Measure Your Deductions from Income			
	Copy your total average monthly income from line 11.			\$ 1,293.00
12.				\$ 1,293.00
12.	Copy your total average monthly income from line 11.			\$ 1,293.00
12.	Copy your total average monthly income from line 11 Calculate the marital adjustment. Check one:			\$1,293.00
12.	Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below.	ly paid for the household	expenses of	\$1,293.00
12.	Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filling with you. Fill in 0 below. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly you or your dependents, such as payment of the spouse's tax liability or the spouse.	ly paid for the household se's support of someone	expenses of other than	\$ 1,293.00
12.	Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filling with you. Fill in 0 below. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly you or your dependents, such as payment of the spouse's tax liability or the spous you or your dependents. Below, specify the basis for excluding this income and the amount of income devo	ly paid for the household se's support of someone	expenses of other than	\$ 1,293.00
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12.	Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filling with you. Fill in 0 below. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly you or your dependents, such as payment of the spouse's tax liability or the spous you or your dependents. Below, specify the basis for excluding this income and the amount of income devolist additional adjustments on a separate page.	ly paid for the household se's support of someone	expenses of other than	\$ 1,293.00
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12.	Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filling with you. Fill in 0 below. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly you or your dependents, such as payment of the spouse's tax liability or the spous you or your dependents. Below, specify the basis for excluding this income and the amount of income devotist additional adjustments on a separate page. If this adjustment does not apply, enter 0 below.	ly paid for the hausehold se's support of someone oted to each purpose. If r	expenses of other than	\$ 1,293.00
12.	Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filling with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly you or your dependents, such as payment of the spouse's tax liability or the spous you or your dependents. Below, specify the basis for excluding this income and the amount of income devolist additional adjustments on a separate page. If this adjustment does not apply, enter 0 below.	ly paid for the hausehold se's support of someone oted to each purpose. If r	expenses of other than necessary,	
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12.	Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filling with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly you or your dependents, such as payment of the spouse's tax liability or the spous you or your dependents. Below, specify the basis for excluding this income and the amount of income devolist additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total	ly paid for the household se's support of someone oted to each purpose. If reference seems are seems as a support of someone seems are seems are seems as a support of seems are	expenses of other than necessary,	0.00
12.	Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filling with you. Fill in 0 below. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly you or your dependents, such as payment of the spouse's tax liability or the spous you or your dependents. Below, specify the basis for excluding this income and the amount of income devotist additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total	ly paid for the household se's support of someone oted to each purpose. If reference seems are seems as a support of someone seems are seems are seems as a support of seems are	expenses of other than necessary,	0.00 \$1,293.00

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 46 of 60

Elizabeth B Jennings Debtor 1 Case number (#known) Last Name 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. 3 16b. Fill in the number of people in your household. 59.881.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. 🔛 Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 1,293.00 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 19b. Subtract line 19a from line 18. 20. Calculate your current monthly income for the year. Follow these steps: 20a. Copy line 19b..... Multiply by 12 (the number of months in a year). 12 20b. The result is your current monthly income for the year for this part of the form. 20c. Copy the median family income for your state and size of household from line 16c. 59,881.00 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjusy I declare that the information on this statement and in any attachments is true and correct. Signature of Debtor 2 Signature of Debtor

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

MM / DD / YYYY

Fill in this i	nformation to ide	ntify your case:				
	Elizabeth B Je					
Debtor 1	First Name	M:ddls Name	Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States	Bankruptcy Court for	the: District	t of			
Case number (If known)						Check if this is an
						amended filing
Official	Form 107					
Statem	ent of Fir	ancial Affair	s for Indiv	iduals Filing f	or Bankruptcy	04/16
				together, both are equali		
	If more space is i nown). Answer ev	•	te sheet to this for	m. On the top of any addit	ional pages, write your n	ame and case
Part 1:	Jive Details Ab	out Your Marital Stat	tus and Where Y	ou Lived Before		
1. What is	your current mari	al status?				
☐ Marr	ied					
✓ Not r	narried					
2. During ti	ne last 3 years, ha	ve you lived anywhere	other than where y	ou live now?		
Ľ No	-	-	-			
☐ Yes.	List all of the place	s you lived in the last 3 y	ears. Do not include	where you live now.		
De	otor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
				Same as Debtor 1		■ Same as Debtor 1
Nu	mber Street		From	Number Street		From
_			To			То
			_			
Cit	y <i>(2000)</i>	State ZIP Code		City	State ZIP Code	
				Same as Debtor 1		Same as Debtor 1
Nı.	mber Street		From	Number Street		From
110	iniper Sueet		To	Number Officer		To
_						
Cit	у	State ZIP Code	-	City	State ZIP Code	
3. Within t	ne last 8 vears, die	t vou ever live with a sr	nouse or legal equi	valent in a community pro	perty state or territory? (Community property
states ar	nd territories includ	Arizona, California, Idal	no, Louisiana, Neva	da, New Mexico, Puerto Ric	o, Texas, Washington, and	Wisconsin.)
☑ No ☐ Yes	Make sure vou fill	out Schedule H: Your Co	debtors (Official For	m 106H).		
<u> </u>	mane sale you iii	sat concume n. 100/ 00	achioro (Ombiai r'Ul			
	www.sec		THE STATE STATE OF THE STATE OF	\$17,000 (10.00 (
Part 2: E	kplain the Sour	ces of Your Income			<u>-</u>	

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 48 of 60

Fill in the If you are	id you have any income from employment or from operating a business during this year or the two previous calendar years? ill in the total amount of income you received from all jobs and all businesses, including part-time activities. you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details.								
		ON SERVICE SER							
		Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross income (before deductions a exclusions)				
	n January 1 of current year until date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$1,626.29	Wages, commissions, bonuses, tips Operating a business	\$				
	last calendar year: uary 1 to December 31,2018)	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$29,368.53	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$				
•			COLUMN TERRETERIS CONTRACTOR CONT	consequences products to the contract of the c					
For t (Jan Did you r Include in	the calendar year before that: uary 1 to December 31,2017 YYYY receive any other income during the come regardless of whether that incoment, and other public benefit payment, and other public benefit payment.	ome is taxable. Examples	of other income are alim		_				
For to (January Did you re Include in unemploy gambling List each	receive any other income during the	bonuses, tips Operating a business his year or the two previouse is taxable. Examples ents; pensions; rental income a joint case and you have	ous calendar years? of other income are alimome; interest; dividends; e income that you receive	bonuses, tips Operating a business nony; child support; Social services from laws and together, list it only once	uits; royalties; and				
For to (January Did you re Include in unemploy gambling List each	receive any other income during the according to the regardless of whether that income regardless of whether that incoment, and other public benefit payment, and lottery winnings. If you are filing source and the gross income from e	bonuses, tips Operating a business his year or the two previouse is taxable. Examples ents; pensions; rental income a joint case and you have	ous calendar years? of other income are alimome; interest; dividends; e income that you receive	bonuses, tips Operating a business nony; child support; Social services from laws and together, list it only once	uits; royalties; and				
For to (January Did you re Include in unemploy gambling List each	receive any other income during the according to the regardless of whether that income regardless of whether that incoment, and other public benefit payment, and lottery winnings. If you are filing source and the gross income from e	bonuses, tips Operating a business his year or the two previouse is taxable. Examples ents; pensions; rental income a joint case and you have	ous calendar years? of other income are alimome; interest; dividends; e income that you receive	bonuses, tips Operating a business nony; child support; Social services from laws and together, list it only once	uits; royalties; and				
For to (Janian Did you in Include in unemploy gambling List each Include Inclu	receive any other income during the according to the regardless of whether that income regardless of whether that incoment, and other public benefit payment, and lottery winnings. If you are filing source and the gross income from e	bonuses, tips Operating a business his year or the two previouse is taxable. Examples ents; pensions; rental income a joint case and you have each source separately. Despensions of the period of t	ous calendar years? of other income are alimome; interest; dividends; e income that you receive o not include income that Gross income from each source (before deductions and	bonuses, tips Operating a business nony; child support; Social services at tooly once to you listed in line 4. Sources of Income	suits; royalties; and a under Debtor 1. Gross Income from each source (before deductions a				
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For to (Jania) Did you re Include in unemploy gambling List each Yes. If From the	receive any other income during the neome regardless of whether that incoment, and other public benefit payment, and lottery winnings. If you are filling source and the gross income from effill in the details.	bonuses, tips Operating a business his year or the two previouse is taxable. Examples ents; pensions; rental income a joint case and you have each source separately. Despensions of the period of t	ous calendar years? of other income are alimome; interest; dividends; e income that you receive o not include income that Gross income from each source (before deductions and	bonuses, tips Operating a business nony; child support; Social services at tooly once to you listed in line 4. Sources of Income	cuits; royalties; and a under Debtor 1. Gross Income from each source (before deductions a				

Elizabeth B Jennings	Case number (# known)
	Case Humber (a daywr)

Pa	rt 3:	List Cer	tain Payme	ents You	Made Befo	re You Filed fo	or Bankruptcy			
6.	Are eith	er Debtor	r Debtor 1's or Debtor 2's debts primarily consumer debts?							
	☐ No.	"incurred	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?							
						ploy, are you pay	any 2/20112. a total ex 40	,		
		☐ No. G	So to line 7.							
		1	total amount	you paid th	at creditor. D	o not include pay	8,425* or more in one or or or one or	ort obligations, such as		
		* Subject	to adjustmer	nt on 4/01/1	9 and every	3 years after that	for cases filed on or afte	r the date of adjustment.		
	☑ Yes	Debtor 1	or Debtor 2	or both ha	IVe nrimarily	consumer debt	s .			
							any creditor a total of \$6	00 or more?		
		_				, ,, ,,-,	,			
			So to line 7.							
		(creditor. Do r	ot include	payments for	domestic suppor	i00 or more and the total t obligations, such as chi for this bankruptcy case.	ld support and		
						Dates of payment	Total amount paid	Amount you still owe	Was this payment for	
							\$	\$	☐ Mortgage	
		Credi	tor's Name				*	<u> </u>	■ Mortgage	
		Numb	per Street						Credit card	
									Loan repayment	
									Suppliers or vendors	
		City		State	ZIP Code				① Other	
					of the Committee of the original of	· 34 · · · · · · · · · · · · · · · · · ·	entre transcriptor de la companya dela companya del companya de la	and the second s	Management of the control of the con	
							\$	\$	☐ Mortgage	
		Credi	tor's Name						☐ Car	
		Numt	per Street						Credit card	
		Hain	DEI Silvet						Loan repayment	
									☐ Suppliers or vendors	
		=							Other	
		City		State	ZIP Code				·	
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							\$	\$	☐ Mortgage	
		Credi	tor's Name						☐ Car	
		Numb	oer Street						☐ Credit card	
		Mulli	Zui Diidel						Loan repayment	
									☐ Suppliers or vendors	
									Other	
		City		State	ZIP Code					
widow - ·										

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 50 of 60

Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners, relatives of any general partners, partnerships of which you are an entired, dividency respons in control. or owner of 20% or more of their viding securities, and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. If No Yes. List all payments to an insider. Dates of Total amount: Amount you still Research for this payment. Insider's Name S Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefite an insider? Include payments on debts guaranteed or costigned by an insider. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefite an insider? Include payments on debts guaranteed or costigned by an insider. Dates of Total amount: Amount you still Research for this payment modulate residue's injure. S S Trailor's Name Number Street Number Street Number Street S S S Insider's Name Number Street Number Street Number Street Number Street Number Street								
Institute Street State ZP Code								
Dates of Total amount payments to an insider. Dates of Footal amount payment Potential payment Pote	ders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; porations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing int, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, has child support and alimony.							
Dates of Postal amount you still Resear for this payment paid one. Insider's Name				•				
Number Street Number Street Street					Reason for this payment			
City State ZiP Code Same	Insider's Name		\$	\$				
Insider's Name Number Street State ZiP Code	Number Street							
Insider's Name State Sta	Chr. Chris 70 g 4	- _						
Number Street City State ZIP Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefite an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of Total amount Amount you still Reban for this payment paid own include creditor's name Insider's Name Number Street S	State ZIP Code		\$	\$				
City State ZiP Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefiter an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of Total amount Amount you still Research for this payment paid owne Include creditor's name Insider's Name Number Street S	Insider's Name	<u> </u>	Ψ	Y_				
Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? notude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of Total amount Amount you still Reason for this payment paid owe Include creditor's name Insider's Name Number Street City State ZIP Code S	Number Street							
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Insider's Name S	n insider? nclude payments on debts guaranteed or cosigned b No		yments or transf	er any property o	n account of a debt that benefited			
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Number Street	ment om avstandere i 185 miljorie – om en mentalskandenhomere se miljorie e		\$	\$				

State

Elizabeth B Jennings			Case number (if known)
First Name	Middle Name	Last Name	

□ No						
Yes. Fill in the details.	*************		annonno il li esercicione il il alab			:: :::::::::::::::::::::::::::::::::::
	Nature of		Court or agency			Status of the ca
Case title Citimortgage, Inc	Foreclos	sure	Duval Count	y Clerk of	the Courts	- Pending
vs. Elizabeth Jennings			501 W Adam Number Street	ns Street	<u> </u>	On appeal Concluded
Case number 16-2012-CA-10676	<u>5</u>		Jacksonville city	FL State Z	32202 IP Code	-
Case title			Court Name			Pending On appeal
Case number	- !		Number Street			Concluded
			Cily	State Z	IP Code	-
No. Go to line 11. Yes. Fill in the information below.	: *** * * *** * * * * * * * * * * * * *	Describe the proper	V		Datë	Value of the prope
=		Describe the proper	West to the second seco		Date	Value of the prope
Yes. Fill in the information below.					Date	Value of the prope
Yes. Fill in the information below. Creditor's Name	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Describe the properl Explain what happer	ied		Date	Value of the prope
Yes. Fill in the information below. Creditor's Name	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Explain what happer Property was r Property was f	ned epossessed. oreclosed.		Date	Value of the prope
Yes. Fill in the information below. Creditor's Name Number Street		Explain what happer Property was f Property was f Property was g	epossessed. oreclosed. gamished.	ied.	Date	Value of the prope
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Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 52 of 60

Case number (# мложп)_

Elizabeth B Jennings

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Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 53 of 60

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rt 6:	List Certain Losses		
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	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your Value of property loss lost
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rt 7:	List Certain Payments or Trans	**************************************	CONTRACTOR AND AND AND AND REPORT AND AND AND AND AND A THE BOTH AND AND A SECURITION AND AND AND AND AND AND AND AND AND AN
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Inclu	de any attorneys, bankruptcy petition pre	parers, or credit counseling agencies for services required in yo	our bankruptcy.
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Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 54 of 60

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Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 55 of 60

Case number (if known)_

Elizabeth B Jennings

	in 10 years before you filed for bankru a beneficiary? (These are often called as		ty to a self-settled trust or similar device of which	1 уоц
	lo res. Fill in the details.			
	oo. I iii iii aro dotano.			
		Description and value of the proper		Date transfer was made
	lance of book			
N	lame of trust	-		
_			Table of the state	
				NATIONAL PARTICIPATION AND AND AND AND AND AND AND AND AND AN
rt 8:	List Certain Financial Accounts	s, Instruments, Safe Deposit	Boxes, and Storage Units	
With	in 1 year before you filed for bankrupt	cy, were any financial accounts o	r instruments held in your name, or for your ben	efit,
close	ed, sold, moved, or transferred?			
			ficates of deposit; shares in banks, credit unions	s ,
Drok	erage houses, pension funds, coopera lo	atives, associations, and other fin	ancial institutions.	
	es. Fill in the details.			
		Last 4 digits of account number		st balance befor
			instrument closed, sold, moved, cle or transferred	ising or transfer
	Name of Financial Institution		_	
	TIME OF THE PROPERTY OF THE PR	xxxx	Checking \$_	
,	Number Street		Savings	
			☐ Money market ☐ Brokerage	
	City State ZIP Code		Other	
-12121	representative to the control of the	$\dots \dots $	and the second s	
		xxxx	☐ Checking \$_	
	Name of Financial Institution		☐ Savings	
	Number Street		☐ Money market	
			☐ Brokerage	
			□ Other	
	City State ZIP Code			
Do y	ou now have, or did you have within 1	year before you filed for bankrup	tcy, any safe deposit box or other depository for	
Do y	ou now have, or did you have within 1 rities, cash, or other valuables?	year before you filed for bankrup		
Do y secu	ou now have, or did you have within 1 rities, cash, or other valuables?	year before you filed for bankrup		•
Doy secu	ou now have, or did you have within 1 rities, cash, or other valuables? lo	year before you filed for bankrup Who else had access to it?		Do you still
Doy secu	ou now have, or did you have within 1 rities, cash, or other valuables? lo		itcy, any safe deposit box or other depository for	Do you still have it?
Do y secu M N	ou now have, or did you have within 1 rities, cash, or other valuables? to es. Fill in the details.	Who else had access to it?	itcy, any safe deposit box or other depository for	Do you still
Do y secu M N	ou now have, or did you have within 1 rities, cash, or other valuables? lo		itcy, any safe deposit box or other depository for	Do you still have it?

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 56 of 60

For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Governmental unit Number Street Number Street Number Street Number Street City State ZIP Code	ebtor 1 Elizabeth	B Jennings Middle Name	Last Name	Case number (# known)	
Yes. Fill in the details. Who tilse has or had ecoses to it? Chesinitis the contents Do you will have it?	_ '	operty in a storage ur	nit or place other than your home wi	hin 1 year before you filed for bankruptcy?	,
Who idea has an had passes to it? Describe the contents Do you still have it? It was not storage Facility Name It was not storage Facility Name It was not storage Facility Name It was not storage Facility No It was not storage Facility Property You Hold or Control for Someone Else City State 2P Code On you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone What's is the property? Describe the property Value No		detella			
Name of Storage Facility Name N	La res. Fill in the	Jetans.	Who else has or had access to it?	Describe the contents	Do you still
Number Street Number Stree					
Number Street Number Street Number Street					□ No
City State ZIP Code	Name of Storage	Facility	Name		☐ Yes
City State ZIP Code	Number Street		Number Street		
Describe the property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No				:	:
Identify Property You Hold or Control for Someone Else			City State ZIP Code		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No	City	State ZIP Code			
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No				•	
or hold in trust for someone. No Yes, Fill in the details. Where is the property? Describe the property. Value Owner's Name Number Street	Part 9: Identify	y Property You Hol	d or Control for Someone Else		
Yes, Fill in the details. Where is the property? Describe the property Value	23. Do you hold or co	ntrol any property tha	t someone else owns? Include any j	property you borrowed from, are storing fo	r,
Value Valu		someone.			
Where is the property? Describe the property Value	= "	al_4_1b_			
Number Street Number Street Number Street Number Street	Tes. Fill in the	details.			
Number Street Number Street Number Street Number Street			where is the property?	Describe the property	Manuel Value
Number Street Number Street Number Street Number Street			_		_
City State ZIP Code	Uwner's Name				\$
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substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Governmental unit Finvironmental law, if you know it Name of site Governmental unit Number Street Number Street City State ZIP Code		• •	· •		
Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? 25. No 26. Yes. Fill in the details. 27. Governmental unit 28. Name of site 29. No 20. Name of site 30. Governmental unit 30. Number Street 30. Number Street 30. Number Street 30. Occurred. 30				ırdous waste, hazardous substance, toxic	
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Governmental unit Number Street Number Street City State ZIP Code	·	•	•		
No ☐ Yes. Fill in the details. Governmental unit	Report all notices, rel	eases, and proceedin	gs that you know about, regardless	of when they occurred.	
No ☐ Yes. Fill in the details. Governmental unit	24. Has any governme	ntal unit notified you	that you may be liable or potentially	liable under or in violation of an environm-	ental law?
Ves. Fill in the details. Governmental unit	and .				
Name of site Governmental unit Governmental unit Number Street City State ZIP Code		1.4.34			
Name of site Governmental unit Number Streat Number Streat City State ZIP Code	Yes. Fill in the	details.		rama (COSTADDA), escribeses su elembro de la laccionada.	
Number Street City State ZIP Code			Governmental unit	Environmental law, if you know it	Date of notice
Number Street City State ZIP Code					
City State ZIP Code	Name of site		Governmental unit		
City State ZIP Code	_	_		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
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			City State ZIP Corte		
City State ZIP Code					
	City	State ZIP Code	_		

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 57 of 60

First Name Middle Name	Last Name	Case number (# known)	
	nit of any release of hazardous material?		
Ø No			
Yes. Fill in the details.	Governmental unit E	rivironmental law, if you know it Date of notic	
			\$ =
			
Name of site	Governmental unit		_
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Cod	e	ALL OF THE STATE O	27547.677.673
lave you been a party in any judicial o	or administrative proceeding under any e	nvironmental law? Include settlements and orders.	
Z No			
Yes. Fill in the details.	. TIBERL - Bilestei (5assassea) (5)		
	Court of agency	Nature of the case Status of the case case	18
Case title		: :	
	Court Name	Pending	_
		☐ On app	
	Number Street	☐ Conclu	ded
Case number	City State ZIP Code		
	·		
t 11: Give Details About Your	Business or Connections to Any Bu	ısiness	
_ -		any of the following connections to any business?	
	yed in a trade, profession, or other activi company (LLC) or limited liability partner		
A partner in a partnership	company (220, or mining habitily partition		
An officer, director, or managing	g executive of a corporation		
An owner of at least 5% of the	voting or equity securities of a corporation	on	
No. None of the above applies. Go			
Yes. Check all that apply above an	d fill in the details below for each busine	ringendelengi, hideleeleelengi, garaaaaaaanni liigaaaaaaa kili kilisteelee	
LegalDocsbyLiz	Describe the nature of the business	Employer identification number Do not include Social Security number or ITIN	
Business Name	Legal Documents		
7134 Electra Dr South	:	EIN: <u>8 1 -2 6 0 5 1 8 </u>	8_
Number 5445	Name of accountant or bookkeeper	Dates business existed	
		From 05/05/2016 To	
Jacksonville FL 3221		From 00/00/2010 16	
The second secon	Describe the nature of the business	Employer Identification number	
Business Name		Do not include Social Security number or ITIN	L.
		EIN:	
Number Street			2
	Name of accountant or bookkeeper	Dates business existed	
		From To	
City State ZIP Cod	le l		

Case 3:19-bk-00087-JAF Doc 1 Filed 01/14/19 Page 58 of 60

•	Employer Identification number Do not include Social Security number or ITIN. EIN: Dates business existed From To anyone about your business? Include all financial
Name of accountant or bookkeeper	Do not include Social Security number or FTIN. EIN: Dates business existed From To
kruptcy, did you give a financial statement to	Pates business existed From To
kruptcy, did you give a financial statement to	FromTo
kruptcy, did you give a financial statement to	
kruptcy, did you give a financial statement to	
•	anyone about your business? Include all financial
•	anyone quodi your business i misiave an imancial
Date issued	
MM / DD / YYYY	
<u> </u>	
<u>—</u>	
<u> </u>	
-	
	ment of Financial Affairs and any attachments stand that making a false statement, concealing can result in fines up to \$250,000, or impriso 1.

Elizbeth Jennings.txt

Tara Rosenfeld Attorney for Plaintiff 305 Biscayne Blvd #402 Miami, FL 33175

Ghidotti/Berger LLP Attorneys for Plaintiff 305 Biscayne Blvd #402 Miami, FL 33175

Credit First National Assoc Attn":BK Credit Operations PO Box 81315 Cleveland, OH 44181-0315

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Merrick Bank Visa Customer Service PO Box 9201 Free Old Bethpage, NY 11804-9001

Seterus PO Box 1077 Hartford, CT 06143-1077

Federal National Mortgage Association Ghidotti/Berger LLP c/o Tara Rosenfeld 305 Biscayne Blvd #402 Miami, FL 33175

United States Trustee-JAX Office of the United States Trustee George C Young Federal Building 400 West Washington Street, Suite 100 Orlando, FL 32801-2210

CW Nexus Credit Card Holding c/o Resurgent Capital Srvcs PO Box 10368 Greenville, SC 29603-0368

Citimortgage, Inc C T Corporation System 1200 South Pine Island Road Fort Lauderdale, FL 33324-4413

Fed Loan Servicing PO Box 69184 Harrisburg, PA 17106-9184

LVNV Funding, LLC its successors and assigns assignee of FNBM, LLC

Elizbeth Jennings.txt

Resurgent Capital Services PO Box 10587 Greenville, SC 29603-0587

Florida Dept of Revenue Bankruptcy Unit PO Box 6668 Tallahassee, FL 32314-6668

BSI Financial Services PO Box 679002 Dallas, TX 75267-9002

City of Jacksonville 117 West Duval Street Ste 480 Jacksonville, FL 32202-5721

Duval County Tax Collector 231 Forsyth St. #130 Jacksonville, FL 32202

Portfolio Recovery Associates LLC PO Box 8099 Norfolk, VA 23541-1067

US Department of Education c/o FedLoan Servicing PO Box 69184 Harrisburg, PA 17106-9184

Credit One Bank Na PO Box 98873 Las Vegas, NV 89193-8873

Dept of Education Attn: Bankruptcy PO Box 16448 Saint Paul, MN 55116-0448

United States Attorney 300 North Hogan St Ste 700 Jacksonville, FL 32202-4204

Elizabeth Jennings 7134 Electra Drive South Jacksonville, FL 32210